



Patent  
Our Docket: GA0201C

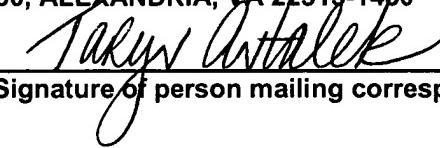
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: ) Art Unit: 1635  
ROBERTS et al. )  
Serial No.: 10/033,145 ) Examiner: Richard Schnizer  
Filed: November 5, 2001 )  
For: PREPARATION AND USE OF )  
SUPERIOR VACCINES )

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE UNITED STATES POSTAL SERVICE AS FIRST-CLASS MAIL IN AN ENVELOPE ADDRESSED TO:  
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1-13-2006  
Date

  
Signature of person mailing correspondence

PETITION FOR THREE MONTH EXTENSION OF TIME UNDER 37 C.F.R. § 1.136(a)

Sir:

This Petition for a Three Month Extension of Time under 37 C.F.R. § 1.136(a) is being filed in response to an Office Action mailed July 13, 2005 in connection with the above-referenced patent application. A response to this Office Action was originally due on October 13, 2005. As part of this communication, Applicants are filing a Petition for a Three Month Extension of Time, thereby extending the deadline to file a response to January 13, 2005. Accordingly, this application is pending today, which provides co-pendency with the Continuation application [a continuation of this application serial no. 10/033,145] filed today under 37 C.F.R. § 1.53(b) in which Applicants intent to pursue prosecution of their invention.

Authorization is hereby given to charge the amount of the Petition for the Three Month Extension of Time to Deposit Account No. 07-1074.

1/13/06  
\_\_\_\_\_  
Date

Respectfully submitted,



Jennifer D. Tousignant  
Agent for Applicants  
Registration No. 54,498  
Telephone: (508) 270-2499  
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GENZYME CORPORATION  
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P.O. Box 9322  
Framingham, Massachusetts 01701-9322



SB/21 (09-04)

1635

# **TRANSMITTAL FORM**

<b>TRANSMITTAL FORM</b> <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/033,145	
	Filing Date	November 5, 2001	
	First Named Inventor	ROBERTS	
	Art Unit	1635	
	Examiner Name	Richard Schnizer	
Total Number of Pages in This Submission	5	Attorney Docket Number	GA0201C

**ENCLOSURES (*check all that apply*)**

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><i>(IN dup)</i><br><input type="checkbox"/> Fee Attached<br><br><input type="checkbox"/> Amendment / Reply<br><br><input type="checkbox"/> After Final<br><br><input type="checkbox"/> Affidavits/declaration(s)<br><br><input checked="" type="checkbox"/> Extension of Time Request<br><i>(2 sheets)</i><br><input type="checkbox"/> Express Abandonment Request<br><br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><br><input type="checkbox"/> Reply to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts<br>under 37 CFR1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><br><input type="checkbox"/> Licensing-related Papers<br><br><input type="checkbox"/> Petition<br><br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><br><input type="checkbox"/> Terminal Disclaimer<br><br><input type="checkbox"/> Request for Refund<br><br><input type="checkbox"/> CD, Number of CD(s) _____<br><br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><br><input type="checkbox"/> Proprietary Information<br><br><input type="checkbox"/> Status Letter<br><br><input checked="" type="checkbox"/> Other Enclosure(s)<br><i>(please identify below):</i><br><br>Return Postcard |
| <b>Remarks</b>  |  |  |

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

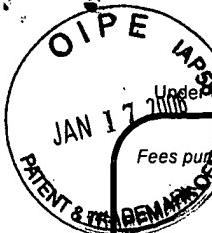
Firm	GENZYME CORPORATION		
Signature			
Printed Name	Jennifer D. Tousignant		
Date	1/13/06	Reg. No.	54,498

## **CERTIFICATE OF TRANSMISSION/MAILING**

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature	TARYN ANTALEK	Date	1/13/09
Typed or printed name	TARYN ANTALEK		

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.  
Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

# FEE TRANSMITTAL for FY 2005

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$)  
**1,020**

Complete If Known	
Application Number	10/033,145
Filing Date	November 5, 2001
First Named Inventor	ROBERTS
Examiner Name	Richard Schnizer
Art Unit	1635
Attorney Docket No.	GA0201C

## METHOD OF PAYMENT (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify) : \_\_\_\_\_  
 Deposit Account Deposit Account Number: 07-1074 Deposit Account Name: GENZYME CORPORATION

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Charge fee(s) indicated below                           | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
| <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) | <input checked="" type="checkbox"/> Credit any overpayments                       |

Under 37 CFR 1.16 and 1.17

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## FEE CALCULATION

### 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fee(\$)</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

### 2. EXCESS CLAIM FEES

#### Fee Description

Each claim over 20 (including Reissues)

#### Small Entity

Fee (\$) Fee (\$)

50

25

Each independent claim over 3 (including Reissues)

200

100

Multiple dependent claims

360

180

#### Total Claims

#### Extra Claims

#### Fee(\$)

#### Fee Paid (\$)

#### Multiple Dependent Claims

Fee (\$)

Fee Paid (\$)

-20 or HP= \_\_\_\_\_

x

=

HP = highest number of total claims paid for, if greater than 20.

#### Indep. Claims

#### Extra Claims

#### Fee(\$)

#### Fee Paid (\$)

#### Fee (\$)

#### Fee Paid (\$)

- 3 or HP= \_\_\_\_\_

x

=

HP = highest number of independent claims paid for, if greater than 3.

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 = _____	/ 50 = _____	(round up to a whole number) x	=	_____

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge) : 3-month extension

1,020

## SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	54,498	Telephone	508.270.2499
Name (Print/Type)	Jennifer D. Tousignant			Date	1/13/06

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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